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## Best Available Copy

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |                   |                                |                   |                    |                                  |                  |          | SMALL ENTITY TYPE  |                        | OR    | OTHER THAN<br>SMALL ENTITY |                        |
|--|--|-------------------|--------------------------------|-------------------|--------------------|----------------------------------|------------------|----------|--------------------|------------------------|-------|----------------------------|------------------------|
| FOR  |  |                   | NUMBER FILED                   |                   | N                  | UMBER I                          | EXTRA            | Γ        | RATE               | FEE                    | ] [   | RATE                       | FEE                    |
| BASIC FEE  |  |                   |                                |                   |                    |                                  |                  |          |                    | 345.00                 | OR    |                            | 690.00                 |
| TOTAL CLAIMS   |  |                   | 24                             | minus 2           | 20= *              | • • 5                            |                  |          | X\$ 9=             |                        | OR    | X\$18=                     | 90.6                   |
| INDEPENDENT CLAIMS   |  |                   |                                | 3) minus          | 3 = *              | = *                              |                  |          | X39=               |                        | OR    | X78=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |                   |                                |                   |                    |                                  |                  | +130=    |                    | OR                     | +260= |                            |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |                   |                                |                   |                    |                                  |                  | L        | TOTAL              |                        | OR    | TOTAL                      | 7800                   |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)            |  |                   |                                |                   |                    |                                  |                  | ;        | SMALL E            | ENTITY                 | OR    | OTHER THAN<br>SMALL ENTITY |                        |
| MENT A   |  | CLA<br>REMA<br>AF | AIMS<br>AINING<br>TER<br>DMENT | VG                |                    | HEST<br>MBER<br>YIOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
| <b>AMENDMENT</b>   | Total  | *                 |                                | Minus             | **                 |                                  | =                |          | X\$ 9=             |                        | OR    | X\$18=                     |                        |
| AME  | Independent  | *                 | N OF                           | Minus             | ***                | IT CL ***                        | =                |          | X39=               |                        | OR    | X78=                       |                        |
|  | FIRST PRESE  | OHAIR             | IN OF MI                       | ULTIPLE DEF       | -ENDEN             | VI CLAIM                         |                  |          | +130=              |                        | OR    | +260=                      |                        |
|  |  |                   |                                |                   |                    |                                  |                  |          | TOTAL              |                        | OR    | TOTAL<br>ADDIT. FEE        |                        |
|  |  | Al                | DDIT. FEE                      | <del> </del>      | •                  | ADDII. FEEL                      |                  |          |                    |                        |       |                            |                        |
| AMENDMENT B  | REM<br>Al  |                   | AIMS MAINING FTER NDMENT       |                   | HIG<br>NUI<br>PREV | umn 2) GHEST MBER VIOUSLY D FOR  | PRESENT EXTRA    |          | RATE<br>:          | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
| NON  | Total  | . 6               | <u> </u>                       | Minus             | ** 6               | 25                               | =                |          | X\$ 9=             |                        | OR    | X\$18=                     |                        |
| AME  | Independent<br>FIRST PRESE   | NTATIO            | <u>ク</u><br>N OF MI            | Minus ULTIPLE DEF | PENDEN             | 3<br>IT CLAIM                    | =/               |          | X39=               |                        | OR    | X78=                       |                        |
|  | , T RESE   |                   | , OI IVIL                      | <u></u>           | 1DEI               | JEANVI                           |                  | <b>'</b> | +130=              |                        | OR    | +260=                      |                        |
|  |  |                   |                                |                   |                    |                                  |                  | A.C      | TOTAL<br>DDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE        |                        |
|  |  |                   | mn 1)                          |                   |                    | umn 2)                           | (Column 3)       |          |                    |                        |       |                            |                        |
| AMENDMENT C  |  | REMA<br>AF        | AIMS<br>AINING<br>TER<br>DMENT |                   | NUM<br>PREV        | HEST<br>MBER<br>(IOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
| MON  | Total  | *                 |                                | Minus             | **                 |                                  | =                | 1        | X\$ 9=             |                        | OR    | X\$18=                     |                        |
| ME   | Independent  | *                 |                                | Minus             | ***                |                                  | =                | 1        | X39=               |                        |       | X78=                       |                        |
| ٧.   | FIRST PRESE  | NTATIO            | N OF MI                        | ULTIPLE DEF       | PENDEN             | NT CLAIM                         |                  | i  -     | <del></del> 1      |                        | OR    |                            | <u></u>                |
|  | f the entry in!  | mn 1 in t         | iss than "                     | te entry in anti- | mn 2'              | te "N" in                        | lumn 3           |          | +130=              |                        | OR    | +260=                      |                        |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                   |                                |                   |                    |                                  |                  |          |                    |                        |       |                            |                        |